

## Departure Processing

### Regular Employees

Anticipated departure date \_\_\_\_\_

Name \_\_\_\_\_ Organization/Group \_\_\_\_\_ Z # \_\_\_\_\_

**To complete your departure process from Los Alamos National Laboratory:**

- ☐ Contact each organization below to sign the appropriate space. Return completed form to HR-B, MS P280 or Otowi Building, 2<sup>nd</sup> floor.
- ☐ **Patent Clearance** Any invention while in the employ of LANL must be reported to Intellectual Property (667-3766).
- ☐ **Contact your group timekeeper to post final hours of pay status.**

### SIGNATURE CERTIFICATION AND AUTHORIZATION

**HR Generalist** Contact your group HR Generalist (<http://www.hr.lanl.gov/Contacts/Generalists.shtml>) to initiate a Personnel Action Form. **(Note: Final Distribution of funds will not be made without Personnel Action Form).**

\_\_\_\_\_  
*HR Generalist, Signature*

\_\_\_\_\_  
*Date*

**Benefits** (Otowi Building, 2<sup>nd</sup> Floor, North) Pre-register to attend session <http://int.lanl.gov/training/workforce.shtml>, click on Benefits, Course# 21013. **If you are going on a Leave or are a Retiree contact 667-1806 to schedule an appointment with your Specialist in lieu of attending this session.**

\_\_\_\_\_  
*Benefit's Specialist, Signature (Attach HR Checklist)*

\_\_\_\_\_  
*Date*

**Medical** Medical exit interviews/evaluations by ESH-2 are performed on a walk-in basis at the Occupational Medicine clinic (8:00am- 1: 00pm and 1:00pm - 5:00pm). If it is determined that a more extensive evaluation is required you will be scheduled for appropriate testing and an appointment with one of the clinicians.

\_\_\_\_\_  
*ESH-2, Signature*

\_\_\_\_\_  
*Date*

**Organization's Document Custodian** Clear your accounts if you have any classified holdings (documents, parts, working papers, reports, vault access, and films).

\_\_\_\_\_  
*Document Custodian or Office Administrator, Signature*

\_\_\_\_\_  
*Date*

**Library** Return all Laboratory books/reports (Main Library Circulation Desk). **They will not clear over the phone.**

\_\_\_\_\_  
*Library, Signature*

\_\_\_\_\_  
*Date*

**Laboratory Keys** Return all government keys to your organization's **Key Custodian**.

\_\_\_\_\_  
*Key Custodian, Signature*

\_\_\_\_\_  
*Date*

**Travel** Settle all outstanding travel accounts and turn in government Diner's Card. (BUS-1, Travel Office,

TRK Bldg., 195 East Rd.). **They will not clear you over the phone.**

\_\_\_\_\_  
*Travel, Signature*

\_\_\_\_\_  
*Date*

**Government Property** Arrange with your **Division's Property Administrator**  
<http://busblue.lanl.gov/bus3/btls.htm> to account for all equipment, keys, and property belonging to LANL.

\_\_\_\_\_  
*Division Property Representative, Signature*

\_\_\_\_\_  
*Date*

**Customer Service Group** Call 5-4444 #854 to arrange clearance from the CCF and the ICN, password section.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

**Communication & Information Resources** You must schedule a visit (667-7318; SM-43, Room D424C) with IM-5 for clearance of classified correspondence.

\_\_\_\_\_  
*IM-5 Signature*

\_\_\_\_\_  
*Date*

**Records Management** Call 7-5079, to verify all files checked out of Records Storage have been returned.

\_\_\_\_\_  
*Records Management Clearing #*

\_\_\_\_\_  
*Date*

**Personnel Dosimetry Office** Call ESH-4, Personnel Dosimetry Section, 7-4854, to determine exit requirements for dosimetry needs.

\_\_\_\_\_  
*External Dosimetry Clearance*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Bioassay/ In Vivo Clearance*

\_\_\_\_\_  
*Date*

### **Clearance Processing/PSAP/Badge Office**

- If you have a clearance badge, you **must check out through the Clearance Processing Team, S-6**
- If you are in a Human Reliability Program (PSAP, PAP) you must then go to the PSAP Office (next door)
- Uncleared badges must be turned in to the Badge Office
- A temporary badge can be issued to terminating employees **FOR NO MORE THAN 5 WORKING DAYS**

\_\_\_\_\_  
*Clearance Processing (Badge Office if uncleared), Signature*

\_\_\_\_\_  
*Date*

**Management Signature** (*Group or Division Leader*) Complete check out process with your management or designated group/division representative. Return all Laboratory issued materials (purchase cards, TokenCard, Smartcard, and/or Cryptocard, credit cards, calling cards, tools, laboratory chemicals or other group specific items). Ensure that records of the organization are transferred upon employee termination.

\_\_\_\_\_  
*Group/Division Leader, Signature*

\_\_\_\_\_  
*Date*

### **Employee Affirmation**

After completion, sign below and send to MS P280 or drop off at HR-B (Otowi, 2<sup>nd</sup> floor).

\_\_\_\_\_  
*Employee Signature*

\_\_\_\_\_  
*Date*